IN THE CLAIMS:

Claims 1-42 (Previously Canceled)

Claims 43-51 (Canceled)

52. (Original) A method for inserting an artificial disc implant into a spinal disc space, comprising:

accessing the disc space;

preparing an implant insertion location in the disc space;

providing an implant having an upper shell, a lower shell, and an elastic spacer between the upper shell and the lower shell, the elastic spacer having a dehydratable hydrogel core;

dehydrating the hydrogel core to reduce the spacer height between the upper and lower shells;

inserting the implant into the disc space; and

rehydrating the hydrogel core to expand the spacer in the disc space until the upper and lower shells contact an adjacent vertebral body.

53. (Original) The method of claim 52, further comprising:

inserting a sleeve adjacent the disc space, the sleeve having a working channel extending between a proximal end and a distal end; and

inserting the implant includes inserting the implant through the working channel

of the sleeve.

54. (Previously presented) A method for inserting an artificial disc implant into a spinal disc space, comprising:

accessing the disc space;

inserting a sleeve adjacent the disc space, the sleeve having a working channel extending between a proximal end and a distal end;

preparing an implant insertion location in the disc space through the sleeve;

providing an implant having an upper shell, a lower shell, and a spacer between the upper shell and the lower shell;

reducing the height of the implant between the upper and lower shells;

inserting the reduced height implant through the working channel of the sleeve to the implant insertion location in the disc space; and

expanding the reduced height implant in the disc space so that the upper shell and the lower shell engage adjacent vertebral endplates.

55. (Previously presented) The method of claim 54, wherein providing an implant includes providing the implant with a substantially cylindrical shape.

56. (Previously presented) The method of claim 55, wherein:

accessing the disc space includes accessing the disc space from a posterior approach; and

the sleeve includes a cylindrical working channel.

57. (Previously presented) The method of claim 56, further comprising:

accessing the disc space at a second location;

inserting a sleeve adjacent the disc space at the second location, the sleeve having a cylindrical working channel extending between a proximal end and a distal end;

preparing a second implant insertion location in the disc space through the sleeve;

providing a second implant having an upper shell, a lower shell, and a spacer between the upper shell and the lower shell;

reducing the height of the second implant between the upper and lower shells; and

inserting the reduced height second implant through the working channel of the sleeve to the second implant insertion location in the disc space.

58. (Previously presented) The method of claim 54, wherein the sleeve is a double barrel sleeve having a pair of adjacent working channels.

59. (Previously presented) The method of claim 58, wherein providing an implant includes providing the implant with the upper shell and the lower shell, each shell including a pair of partially cylindrical lobes interconnected by an intermediate portion, the implant being configured for insertion through the adjacent working channels of the double barrel sleeve.

60. (Previously presented) The method of claim 54, wherein reducing the height of the implant includes compressing the spacer between the upper shell and the lower shell.

61. (Previously presented) The method of claim 60, wherein the spacer is elastic.

62. (Previously presented) The method of claim 58, wherein reducing the height of the implant includes dehydrating the spacer.

63. (New) The method of claim 53, wherein the sleeve is a double barrel sleeve having a pair of adjacent working channels.

64. (New) The method of claim 63, wherein providing an implant includes providing the implant with the upper shell and the lower shell, each shell including a pair of partially cylindrical lobes interconnected by an intermediate portion, the implant being configured for insertion through the adjacent working channels of the double barrel sleeve.

65. (New) A method for inserting an artificial disc implant into a spinal disc space, comprising:

accessing the disc space;

preparing an implant insertion location in the disc space;

providing an implant having an upper shell, a lower shell, and a spacer between the upper shell and the lower shell, the spacer having a hydratable hydrogel core;

inserting the implant into the disc space; and

hydrating the hydrogel core to expand the spacer in the disc space.

66. (New) The method of claim 65, further comprising:

inserting a sleeve adjacent the disc space, the sleeve having a working channel extending between a proximal end and a distal end; and

inserting the implant includes inserting the implant through the working channel of the sleeve.

67. (New) The method of claim 66, wherein the sleeve is a double barrel sleeve having a pair of adjacent working channels.

68. (New) The method of claim 67, wherein providing an implant includes providing the implant with the upper shell and the lower shell, each shell including a pair of partially cylindrical lobes interconnected by an intermediate portion, the implant being configured for insertion through the adjacent working channels of the double barrel sleeve.

69. (New) The method of claim 65, wherein hydrating the hydrogel core includes expanding the spacer in the disc space to position the upper shell and lower shell in

contact with an adjacent vertebral endplate.

70. (New) The method of claim 65, further comprising:

dehydrating the hydrogel core to reduce the spacer height between the upper and lower shells before inserting the implant into the disc space; and

rehydrating the hydrogel core to expand the spacer in the disc space after inserting the implant into the disc space.

71. (New) The method of claim 65, wherein accessing the disc space includes accessing the disc space from an anterior approach.